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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Attorney Docket Number 149459.00003

First Named Inventor CLAUS HARDER

COMPLETE IF KNOWN

Application Number TBA

Filing Date July 11, 2006

Art Unit TBA

Examiner Name TBA

Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16(e)
required)

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPLANT FOR RELEASING AN ACTIVE SUBSTANCE INTO A VESSEL THROUGH WHICH A BODY MEDIUM FLOWS

(Title of the invention)

the specification of which

 is attached hereto

OR

02/04/2005

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number PCT/EP2005/001167

and was amended on ((MM/DD/YYYY))

07/11/2006

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
10 2004 006 745.7	DE	02/06/2004	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
10 2004 029 611.1	DE	06/09/2004	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>

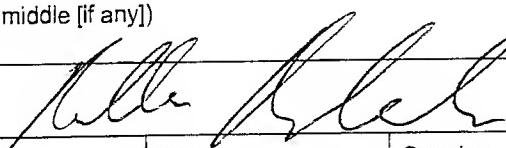
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION – Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> The address associated with Customer Number:	25207	OR	<input type="checkbox"/>	Correspondence address below
Name POWELL GOLDSTEIN LLP						
Address ONE ATLANTIC CENTER, 14 TH FLOOR 1201 W. PEACHTREE STREET, NW						
City ATLANTA		State GEORGIA		ZIP 30309		
Country UNITED STATES	Telephone 404-572-6900			Email jbernstein@pogolaw.com		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) CLAUS				Family Name or Surname HARDER		
Inventor's Signature					Date	
Residence: City Uttenreuth	State	Country Germany	Citizenship German			
Mailing Address Memelstraße 7						
City Uttenreuth	State	Zip 91080	Country Germany			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) ROLAND				Family Name or Surname ROHDE		
Inventor's Signature 					Date JUNE 15, 2006	
Residence: City Burgdorf	State	Country Germany	Citizenship German			
Mailing Address Flaatmoor 4						
City Burgdorf	State	Zip 31303	Country Germany			
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being required on the <u>3</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.						

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 2

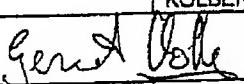
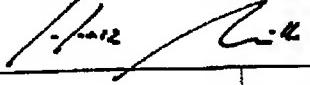
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))	Family Name or Surname		
BERND	HEUBLEIN (DECEASED)		
Inventor's Signature			
Residence: City Hannover	State	Germany Country	German Citizenship
Mailing Address Albrechtstrasse 2			
City Hannover	State	D-30627 Zip	Germany Country
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))	Family Name or Surname		
ERHARD	FLACH		
Inventor's Signature <i>Erhard Flach</i>	Date <i>June 08, 2006</i>		
Berlin	State	Germany Country	German Citizenship
Residence: City			
Krusauer Straße 20a			
Mailing Address			
Berlin	State	12305 Zip	Germany Country
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))	Family Name or Surname		
WOLFGANG	GEISTERT		
Inventor's Signature <i>Wolfgang Geistert</i>	Date <i>June 8, 2006</i>		
Rheinfelden	State	Germany Country	German Citizenship
Residence: City			
Rheinstraße 7			
Mailing Address			
Rheinfelden	State	79618 Zip	Germany Country
City			

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If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
	Page <u>2</u> of <u>2</u>

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
GERNOT Inventor's Signature 		KOLBERG Date <u>June 8, 2006</u>	
Berlin Residence: City		State	Germany Country
Karl-Marx-Straße 37 Mailing Address			
Berlin City		State	12043 Zip
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
HEINZ Inventor's Signature 		MÜLLER Date <u>November 27, 2006</u>	
Erlangen Residence: City		State	Germany Country
Stubenlochstraße 14 d Mailing Address			
Erlangen City		State	D-9105 Zip
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address			
City		State	Zip
		Country	

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DECLARATION Supplemental Sheet
For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor

Enter Deceased or Incapacitated Inventor's Name Bernd Heublein Page 1 of 1

Name of Legal Representative:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative		
Given Name (first and middle (if any)) <u>Eva</u>		Family Name or Surname <u>Heublein</u>		
Legal Representative's Signature <i>Eva Heublein</i>		Date <u>15th April 2007</u>		
Residence: City <u>Coburg</u>	State	Country <u>Germany</u>	German Citizenship	
Mailing Address <u>Wassergasse 4</u>				
Mailing Address <u>Wassergasse 4</u>	City <u>Coburg</u>	State	Zip <u>96450</u>	Country <u>Germany</u>
Name of Additional Legal Representative, If any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative		
Given Name (first and middle (if any)) <u>Nora</u>		Family Name or Surname <u>Heublein</u>		
Legal Representative's Signature <i>Koratteneublein</i>		Date <u>April 17th, 2007</u>		
Residence: City <u>Koeln</u>	State	Country <u>Germany</u>	German Citizenship	
Mailing Address <u>Ostlandstrasse 50</u>				
Mailing Address <u>Ostlandstrasse 50</u>	City <u>Koeln</u>	State	Zip <u>50858</u>	Country <u>Germany</u>
Name of Additional Legal Representative, If any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative		
Given Name (first and middle (if any)) <u>Christoph</u>		Family Name or Surname <u>Heublein</u>		
Legal Representative's Signature <i>Christoph Heublein</i>		Date <u>15th April 2007</u>		
Residence: City <u>Hannover</u>	State	Country <u>Germany</u>	German Citizenship	
Mailing Address <u>Albrechtstrasse 2</u>				
Mailing Address <u>Albrechtstrasse 2</u>	City <u>Hannover</u>	State	Zip <u>30627</u>	Country <u>Germany</u>

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.84(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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(37 CFR 1.63)**

Attorney Docket Number 149459.00003

First Named Inventor CLAUS HARDER

COMPLETE IF KNOWN

Application Number TBA

Filing Date July 11, 2006

Art Unit TBA

Examiner Name TBA

Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16(e)
required)

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(Title of the invention)

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 is attached hereto

OR

02/04/2005

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number PCT/EP2005/001167

and was amended on ((MM/DD/YYYY))

07/11/2006

(if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
10 2004 006 745.7	DE	02/06/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 2004 029 611.1	DE	06/09/2004	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

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If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION – Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		The address associated with Customer Number:	25207	OR	<input type="checkbox"/>	Correspondence address below
Name POWELL GOLDSTEIN LLP						
Address ONE ATLANTIC CENTER, 14 TH FLOOR 1201 W. PEACHTREE STREET, NW						
City ATLANTA		State	GEORGIA	ZIP	30309	
Country UNITED STATES	Telephone 404-572-6900			Email	jbernstein@pogolaw.com	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) CLAUS			Family Name or Surname HARDER			
Inventor's Signature <i> Claus Harder</i>					Date	<i>June 8, 2006</i>
Residence: City Uttenreuth	State	Country Germany	Citizenship German			
Mailing Address Memelstraße 7						
City Uttenreuth	State	Zip 91080	Country Germany			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) ROLAND			Family Name or Surname ROHDE			
Inventor's Signature					Date	
Residence: City Burgdorf	State	Country Germany	Citizenship German			
Mailing Address Flaatmoor 4						
City Burgdorf	State	Zip 31303	Country Germany			
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being required on the <u>3</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.						

DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))	Family Name or Surname			
BERND	HEUBLEIN (DECEASED)			
Inventor's Signature				Date
Residence: City Hannover	State	Germany Country	German Citizenship	
Mailing Address Albrechtstrasse 2				
City Hannover	State	D-30627 Zip	Germany Country	
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))	Family Name or Surname			
ERHARD	FLACH			
Inventor's Signature <i>Erhard Flach</i>				Date <i>June 08, 2006</i>
Berlin	State	Germany Country	German Citizenship	
Residence: City				
Krusauer Straße 20a				
Mailing Address				
Berlin	State	12305 Zip	Germany Country	
City				
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))	Family Name or Surname			
WOLFGANG	GEISTERT			
Inventor's Signature <i>Wolfgang Geistert</i>				Date <i>June 8, 2006</i>
Rheinfelden	State	Germany Country	German Citizenship	
Residence: City				
Rheinstraße 7				
Mailing Address				
Rheinfelden	State	79618 Zip	Germany Country	
City				

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet	Page <u>2</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
GERNOT Inventor's Signature <i>Gernot Gernot</i>		KOLBERG Date <u>June 8, 2006</u>	
Berlin Residence: City	State	Germany Country	German Citizenship
Karl-Marx-Straße 37 Mailing Address			
Berlin City	State	12043 Zip	Germany Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
HEINZ <i>Heinz</i>		MÜLLER Date <u>November 27, 2006</u>	
Erlangen Residence: City		Germany Country	
Stubenlochstraße 14 d Mailing Address			
Erlangen City	State	D-9105 Zip	Germany Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		Country	
Mailing Address			
City	State	Zip	Country

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DECLARATION Supplemental Sheet
For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor

Enter Deceased or Incapacitated Inventor's Name Bernd Heublein Page 1 of 1

Name of Legal Representative:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative		
Given Name (first and middle (if any)) <u>Eva</u>		Family Name or Surname <u>Heublein</u>		
Legal Representative's Signature <i>Eva Heublein</i>		Date <u>15th April 2007</u>		
Residence: City <u>Coburg</u>	State	Country <u>Germany</u>	German Citizenship	
Mailing Address <u>Wassergasse 4</u>				
Mailing Address <u>Wassergasse 4</u>	City <u>Coburg</u>	State	Zip <u>96450</u>	Germany Country
Name of Additional Legal Representative, If any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative		
Given Name (first and middle (if any)) <u>Nora</u>		Family Name or Surname <u>Heublein</u>		
Legal Representative's Signature <i>Korattenuheublein</i>		Date <u>April 17th, 2007</u>		
Residence: City <u>Koeln</u>	State	Country <u>Germany</u>	German Citizenship	
Mailing Address <u>Ostlandstrasse 50</u>				
Mailing Address <u>Ostlandstrasse 50</u>	City <u>Koeln</u>	State	Zip <u>50858</u>	Germany Country
Name of Additional Legal Representative, If any:		<input type="checkbox"/> A petition has been filed for this non-signing legal representative		
Given Name (first and middle (if any)) <u>Christoph</u>		Family Name or Surname <u>Heublein</u>		
Legal Representative's Signature <i>Christoph Heublein</i>		Date <u>15th April 2007</u>		
Residence: City <u>Hannover</u>	State	Country <u>Germany</u>	German Citizenship	
Mailing Address <u>Albrechtstrasse 2</u>				
Mailing Address <u>Albrechtstrasse 2</u>	City <u>Hannover</u>	State	Zip <u>30627</u>	Germany Country

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.84(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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